

Lexington County Communications

434 Ball Park Road Lexington, South Carolina 29072 Phone: 803.785.2366

Fax: 803.785.8200

COMMUNICATIONS DOCUMENT REQUEST & RELEASE FORM

It is the policy of the Lexington County Communications Center to comply with the provisions of the South Carolina Freedom of Information Act, by releasing the following departmental records.

There is a \$35.00 fee per request. Audio copies are provided in compact disc form. You will be contacted when the information is ready to be picked up.

PLEASE PRINT OR TYPE INFORMATION BELOW:

Requested by:		Contact Number:		
Date of Request:		Case Number: (If Known)		
-			(If Known)	
Incident Location:				
_		(Street Address)	_	
Date & Time of Incid	lent:			
2 000 00 11110 01 111010		act Date and Appro	oximate Time)	
Additional Call Info	mation:			
radiionai Can imoi				
Call Card	EMS	Fire Ser	vice Law Enforcement	
	911 Call	Oth	er	
County use only For R	eleasing Above In	ıformation: \$	Collected	
Signature of Recipient		Date	Organization	
Drivers License #		Other Identification (Specify)		
Signature of releasing County Person			Date / Time	

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